PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									09/835357					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	. EN	NTITY	OR	OTHER SMALL		
TOTAL CLAIMS								RATI	E.	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 3		355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		•			X\$ 9			OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =					X40=			OR	X80=		
MULTIPLE DEPENDENT CLAIM PI			RESENT					.105			1	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=			OR	TOTAL		
CLAIMS AS AMENDED - PART II								TOTA	<b>L</b>		OR	OTHER	THAN	
		(Column 1)				(Column 3)	SMALL ENTITY			OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· Ų	Minus	3	)	(		X\$ 9:	= ,		OR	X\$18=	•	
	Independent	• /	Minus	₩ 3				X40=			OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135:	_		OR	+270=		
								TOT	AL			TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT. F	EE		Jon	ADDIT. FEE		
AMENDMENT B		CLAIMS		HIGH	EST		lr		_	ADDI-	) .	<del></del>	ADDI-	
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	••		<b>.</b>		X\$ 9=	=		OR	X\$18=		
	Independent	•	Minus	•••		=		X40=		• •	OR	X80=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		!	+135=	_		OR	+270=		
							, <b>L</b>	TOT	AL		000	TOTAL		
		(Column 1)		(Colur	2\	(Column 2)		ADDIT. FI	EE L		JO. 1	ADDIT. FEE		
		CLAIMS		HIGH	EST	(Column 3)	lr			4001	1		4001	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	:	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=		X\$ 9=			OR	X\$18=		
	Independent	•	Minus	•••		=	<b> </b>	X40=	1		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								$\dashv$					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR ADDIT. FEE														
		ber Previously Pai					ır tou	nd in the	app	ropriate box	in col	lumn 1.		

Application or Docket Number